

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

COMMUNITY ACTION NOW

ADDRESS (number and street)

8508 QUEENS BLVD 2/FL

☐ Check if different than previously reported. (ACC)

ELMHURST

NY

11373

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00575829

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

07

01

2015

12

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Fanny Lawren

Signature of Treasurer

Fanny Lawren

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

01

29

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COMMUNITY ACTION NOW

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		59772.29
(b) Cash on Hand at Beginning of Reporting Period.....	59772.29	
(c) Total Receipts (from Line 19)	204999.00	204999.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	264771.29	264771.29
7. Total Disbursements (from Line 31)	207057.07	207057.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57714.22	57714.22
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

COMMUNITY ACTION NOW

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 01 2015

To:

 M M / D D / Y Y Y Y Y
 12 31 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

204999.00

204999.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

204999.00

204999.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

204999.00

204999.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

204999.00

204999.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

204999.00

204999.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	179157.18	179157.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	179157.18	179157.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	27899.89	27899.89
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	207057.07	207057.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	207057.07	207057.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	204999.00	204999.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	204999.00	204999.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	179157.18	179157.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	179157.18	179157.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. 267 Canal Street Corp

Mailing Address 267 Canal Street Corp
Suite 203

City State Zip Code
New York NY 10013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2015

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

B. CT Trio Limited Partnership

Mailing Address 720 Bedford Street

City State Zip Code
Stamford CT 06901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2015

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

C. Delsen Service Inc

Mailing Address 131-29 Sanford Ave

City State Zip Code
Flushing NY 91355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period

20000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Dynasty Management Inc

Mailing Address 202 Centre Street
6th Floor

City State Zip Code
New York NY 10013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Far Far East Group LLC

Mailing Address 158 Payne Whitney Lane

City State Zip Code
Manhasset NY 11030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 17 / 2015

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Bruce Fung

Mailing Address 32 Baxer Lane

City State Zip Code
West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Heng Sang Realty

Real Estate Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8333.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 22 / 2015

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period

8333.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

23333.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Peter Fung

Mailing Address 51 O'Connor Circle

City	State	Zip Code
West Orange	NJ	07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crystal Lake TradingOccupation
Wholesaler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2015

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period

8333.00

Full Name (Last, First, Middle Initial)

B. Steve Fung

Mailing Address 405 Metzger Dr

City	State	Zip Code
West Orange	NJ	07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heng Sang RealtyOccupation
Real Estate Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2015

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period

8333.00

Full Name (Last, First, Middle Initial)

C. Lam NYC EB-5 Fund LLCMailing Address 202 Centre Street
6th Floor

City	State	Zip Code
New York	NY	10013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21666.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Larm Oi Management Inc

Mailing Address 341 E 78th Street

City

New York

State

NY

Zip Code

10075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
07 / 22 / 2015

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. OVQ Consolidated Corp

Mailing Address 2065 W 9th Street

City

Brooklyn

State

NY

Zip Code

11223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
07 / 15 / 2015

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Ramada Flushing Hotel

Mailing Address 36-27 Prince Street

City

Flushing

State

NY

Zip Code

11354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
12 / 16 / 2015

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. S&L Aerospace Metals LLC

Mailing Address 12012 28th Ave

City

Flushing

State

NY

Zip Code

11354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Vantage Construction Group Inc

Mailing Address 1979 Marcus Ave
Suite 218

City

New Hyde Park

State

NY

Zip Code

11042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

c. Zhenyu Wang

Mailing Address 22 Witte Pl

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Wall Street IPO Consultation

Financial Consultant

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2015

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78000.00

204999.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Democratic Organization of Queens

Mailing Address 72-50 Austin Street

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 03 / 2015
Transaction ID : SB21B.4163

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Hamilton Madison HouseMailing Address 263 South Street
2nd Floor

City New York State NY Zip Code 10002

Purpose of Disbursement
Donatino to community non-profit

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2015
Transaction ID : SB21B.4173

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. L3 Advertising IncMailing Address 115 Bowery
3rd Floor

City New York State NY Zip Code 10002

Purpose of Disbursement
Posters

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2015
Transaction ID : SB21B.4171

Amount of Each Disbursement this Period

2007.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3507.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Research

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015
Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Consulting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 13 / 2015
Transaction ID : SB21B.4166

Amount of Each Disbursement this Period

30153.75

Full Name (Last, First, Middle Initial)

C. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2015
Transaction ID : SB21B.4167

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55153.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNITY ACTION NOW

Full Name (Last, First, Middle Initial)

A. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Street team

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2015
Transaction ID : SB21B.4168

Amount of Each Disbursement this Period

31229.50

Full Name (Last, First, Middle Initial)

B. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Research

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 08 / 2015
Transaction ID : SB21B.4170

Amount of Each Disbursement this Period

17243.25

Full Name (Last, First, Middle Initial)

C. Multi Media

Mailing Address 150-50 14th Road

City Whitestone State NY Zip Code 11357

Purpose of Disbursement
Conulsting services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2015
Transaction ID : SB21B.4169

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53472.75

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

COMMUNITY ACTION NOW

A. Multi Media

Category/
Type

14352.57

State: District:

B.

Category/
Type

State: District:

C.

Category/
Type

State: District:

14352.57

178977.18

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 18
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) COMMUNITY ACTION NOW			FEC IDENTIFICATION NUMBER ▼ C C00575829	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Multi Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 150-50 14th Road			Amount 9060.96	
City Whitestone	State NY	Zip Code 11357	Transaction ID : SE.4131	
Purpose of Expenditure Direct mail		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 06 / 2015	
Name of Federal Candidate NYDIA M. VELAZQUEZ			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 9060.96			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Multi Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 150-50 14th Road			Amount 11963.93	
City Whitestone	State NY	Zip Code 11357	Transaction ID : SE.4135	
Purpose of Expenditure Direct mail		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2015	
Name of Federal Candidate NYDIA M. VELAZQUEZ			Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 21024.89			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			21024.89	
(b) SUBTOTAL of Unitemized Independent Expenditures▶				
(c) TOTAL Independent Expenditures.....▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Fanny Lawren			Date [Electronically Filed] M M / D D / Y Y Y Y Y Y 01 / 29 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 18
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) COMMUNITY ACTION NOW			FEC IDENTIFICATION NUMBER ▼ C C00575829		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			M M M / D D D / Y Y Y Y Y Y		
Full Name of Payee Multi Media			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y		
Mailing Address 150-50 14th Road			Amount 6875.00		
City Whitestone		State NY	Zip Code 11357		Transaction ID : SE.4134
Purpose of Expenditure Direct mail		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2015		
Name of Federal Candidate NYDIA M. VELAZQUEZ		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought		27899.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			6875.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			27899.89		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Fanny Lawren		[Electronically Filed]		Date	
Signature				M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016	